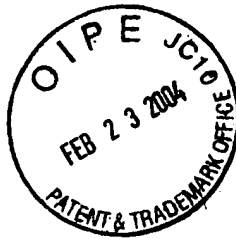


In re
Application of: Mundschenk et al
Serial No. 09/240,455
Filing Date: January 29, 1999
For: BUCCAL DELIVERY SYSTEM



Atty. Ref. No.: 15050.5.0
Group Art Unit: 1615
Examiner: Rachel Bennett

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir: Transmitted herewith is an amendment in the above-identified application.

[X] applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.

[X] No additional fee is required. The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR
TOTAL	* 59	MINUS ** 68 = 0
INDEP.	* 3	MINUS *** 6 = 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM		

SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
RATE	ADDIT. FEE		RATE	ADDIT. FEE
\$9	\$		\$18	\$
\$42	\$		\$84	\$
	\$			\$
TOTAL ADDIT. FEE	\$	OR	TOTAL	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

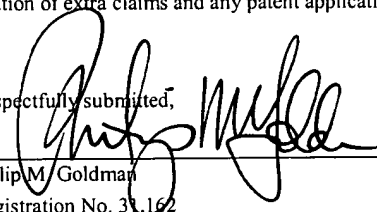
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

[] Please charge Deposit Account No. 061910 in the amount of \$_____.

[] A check in the amount of \$_____ is attached.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 061910, including any filing fees under 37 CFR 1.16 for the presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,


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